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FEC

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3X	For Other Th	nan An Authorize	ed Committee		Office Use Or	ıly
NAME OF COMMITTEE (in full)	TYPE OR PRI	_,	cample: If typing, ty	pe 12FE	4M5	
COURAGEOUS	CONSERVATIV	ES PAC				1
l						
	5 Halifax Ct					
ADDRESS (number and street) ▼	reet)					
Check if differenthan previously reported. (ACC)	t Marlton			NJ	08053	
2. FEC IDENTIFICATION	ON NUMBER ▼	CITY ▲		STATE ▲	ZIP	CODE ▲
C C00587022		3. IS THIS REPOR	4.4	or \square	AMENDED (A)	
4. TYPE OF REPOR (Choose One)(a) Quarterly Reports	Report Due On	1 00 20 (14)			Aug 20 (M8) Sep 20 (M9)	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only)
April 15		Apr 20 (M4	Jul 20	(M7)	Oct 20 (M10)	x Jan 31 (YE)
Quarterly Re July 15 Quarterly Re	eport (Q2) (C) 12	-Day RE-Election eport for the:	Primary (12P) Convention (12C)	H	eral (12G) cial (12S)	Runoff (12R)
October 15 Quarterly Re		port for the				
January 31 Year-End Re	eport (YE)	Election on	M M / D	D / Y Y Y		the ate of
July 31 Mid- Report (Non Year Only) (-election MY) PC	DST-Election port for the:	General (30G)	Run	off (30R)	Special (30S)
Termination (TER)	Report	Election on	M = M / D =	D / Y = Y = Y		the tte of
5. Covering Period	11 29	2016	through	12 / 31	2016	Y
I certify that I have exam	ined this Report and Curtis, Elizal		owledge and belief	it is true, correc	and complete.	
Type or Print Name of Tr						
Signature of Treasurer	Curtis, Elizabeth, , ,		[Electronically Filed		01 / 30	2017
NOTE: Submission of false	, erroneous, or incomp	lete information may	subject the person s	igning this Report	to the penalties of	f 52 U.S.C. § 30109
Office Use Only						ORM 3X 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016) Page 2

Write or Type Committee Name

F	lepor		M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	To: 12 / 31 / 2016
			COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a)	Cash on Hand January 1, 2016		7168.24
	(b)	Cash on Hand at Beginning of Reporting Period	3629.22	
	(c)	Total Receipts (from Line 19)	0.00	275700.21
	(d)	Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	3629.22	282868.45
7 .	Tota	al Disbursements (from Line 31)	766.70	280005.93
3.	Re	sh on Hand at Close of porting Period btract Line 7 from Line 6(d))	2862.52	2862.52
).	the	ots and Obligations Owed TO Committee (Itemize all on nedule C and/or Schedule D)	0.00	
0.	the	ots and Obligations Owed BY Committee (Itemize all on nedule C and/or Schedule D)	202501.35	

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

COURAGEOUS CONSERVATIVES PAC

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees		
(i) Itemized (use Schedule A)	0.00	111712.00
(ii) Unitemized	0.00	9741.48
(iii) TOTAL (add	0.00	121453.48
Lines 11(a)(i) and (ii)▶	0.00	121700.70
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees		
(such as PACs)	0.00	2500.00
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)▶	0.00	123953.48
Transfers From Affiliated/Other		
Party Committees	0.00	0.00
All Loans Received	0.00	145501.35
All Loans rieceived	4 4	4 4
Loan Repayments Received	0.00	0.00
Offsets To Operating Expenditures	7 7	7 7
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	6245.38
Refunds of Contributions Made	4 4	4 4
to Federal Candidates and Other		
Political Committees	0.00	0.00
Other Federal Receipts	4 4	4 4
(Dividends, Interest, etc.)	0.00	0.00
Transfers from Non-Federal and Levin Funds	0.00	4 4
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
(1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	4 4	
(b) Levin Funds (from Schedule H5)	0.00	0.00
(b) Lovin i unuo (nom obnedule 110)	4 4	4 4
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	0.00	275700.21
T. 15 1 18 11	, , , , , , , , , , , , , , , , , , , ,	
Total Federal Receipts	0.00	275700.04
(subtract Line 18(c) from Line 19)▶	0.00	275700.21

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
Operating Expenditures: (a) Allocated Federal/Non-Federal	Total Tills I Gliou	Calcillal Teal-10-Date		
Activity (from Schedule H4)				
(i) Federal Share	0.00	0.00		
(ii) Non-Federal Share	0.00	0.00		
(b) Other Federal Operating	4 4 4 4			
Expenditures	766.70	91635.26		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	766.70	91635.26		
Transfers to Affiliated/Other Party	0.00	0.00		
Committees	0.00	0.00		
Federal Candidates/Committees and Other Political Committees	0.00	0.00		
Independent Expenditures (use Schedule E)	0.00	188370.67		
Coordinated Party Expenditures (52 U.S.C. § 30116(d))	7 7 7	7 7 7		
(use Schedule F)	0.00	0.00		
Loan Repayments Made	0.00	0.00		
Loone Mode	0.00	0.00		
Loans Made	0.00	0.00		
Than Political Committees	0.00	0.00		
(b) Political Party Committees	0.00	0.00		
(c) Other Political Committees	5.00	4 4		
(such as PACs)	0.00	0.00		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00		
Other Disharases at the hading	7 7	4 4		
Other Disbursements (Including Non-Federal Donations)	0.00	0.00		
Factorial Floriton Addition (FO. H.O.O. A. COMONIA	4 4	4 4		
Federal Election Activity (52 U.S.C. § 30101(3) (a) Allocated Federal Election Activity	20))			
(from Schedule H6)				
(i) Federal Share	0.00	0.00		
(ii) "Levin" Share	0.00	0.00		
(b) Federal Election Activity Paid	4 4	4 4 4		
Entirely With Federal Funds	0.00	0.00		
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00		
Talal Bish and a sale (c. 111)	7 7 7	7 7 7		
Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	766.70	280005.93		
	700.70	200005.93		
Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)				
from Line 31)	766.70	280005.93		
•	7 7 7	200003.93		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	0.00	123953.48
44. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	123953.48
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	766.70	91635.26
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	6245.38
8. Net Operating Expenditures (subtract Line 37 from Line 36)	766.70	85389.88

17

SCHEDULE B (FEC Form 3X)	I la c	les congrets cohodule(s)		NUMBER	PAGE 6 OF 2	
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page		(check on			
			X 21b		23 28c	26 27 29 30b
Any information copied from such Departs and Statem	onte mou s	ot he cold or us				
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam						
NAME OF COMMITTEE (In Full)						
$ \; angle$ COURAGEOUS CONSERVATIVES	S PAC					
Full Name (Last, First, Middle Initial) A. C&H Financial Services				Date o	f Disburse	ement
" Can Financial Services						
Mailing Address 1 Westbrook Corporate Center				12	, O:	
Ste 300		I				
City Westchester	State IL	Zip Code 60154		FEC Id	lentification	n Number
Purpose of Disbursement		00134		C	C0058702	22
Merchant Services Fees			1 1			ID : SB21B.4951
Candidate Name			Category/			Disbursement this Period
COURAGEOUS CONSERVATIVES			Туре			50.95
	nent For: 2 Primary	016 General			50.85	
	Other (spec	_ ·		П.,		
State: District:		, ,		IVIE	emo Item	
Full Name (Last, First, Middle Initial)						
B. C&H Financial Services				Date o	f Disburse	ement
Mailing Address 1 Weethreek Cornersta Contar	Mailing Address (W. d. 10				/ D	05 2016
Mailing Address 1 Westbrook Corporate Center Ste 300				12	Ų	2010
City	State	Zip Code		FFC Ic	lentification	n Number
Westchester Purpose of Disbursement	IL	60154				
Merchant Services Fees				C C00587022	22	
Candidate Name			Category/ Type			ID: SB21B.4952 Disbursement this Period
COURAGEOUS CONSERVATIVES	S PAC			Amoun	t of Lacif	Disbursement this Feriou
	nent For: 2					75.85
	Primary	★ General				
President State: District:	Other (spec	шу)		Me	emo Item	
Full Name (Last, First, Middle Initial)						
C. Curtis, Elizabeth, , ,				Date o	f Disburse	ement
				M M		
Mailing Address 5 Halifax Ct				12	2	1 2016
City	State	Zip Code		FF0.1-		. Niverban
Marlton	NJ	08053		FEC IC	lentificatior	n Number
Purpose of Disbursement Treasury Consulting				C	C0058702	22
Candidate Name						ID : SB21B.4950
COURAGEOUS CONSERVATIVE	S PAC		Category/ Type	Amoun	t of Each	Disbursement this Period
Office Sought: House Disbursem	016	Туре			630.00	
Senate Primary 🗶 General					7	7
	Other (spec	eify) ▼		Me	emo Item	
State: District:						
SUBTOTAL of Disbursements This Page (optional)						756.70
COSTOTAL OF DISDUISEMENTS THIS Fage (optional)			·····	-	-	7 7
TOTAL This Period (last page this line number only).						756.70

Use separate schedule(s) for each category of the Detailed Summary Page

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		Detailed Sulfillary Page FOR LINE 13 OF FORM 3X		
IAME OF COMMITTEE (In Full) COURAGEOUS CONSERVATIVE	S PAC	Transaction ID : SC/10.4280		
LOAN SOURCE Full Name (Last, First, Mi Ekstrom, Christopher, , ,	ddle Initial)	N ☐ Memo Item		
Mailing Address 25 Highland Park Village		U Other (specify) ▼		
Suite 100 City	State	ZIP Code		
Dallas	TX	75205		
Original Amount of Loan	Cumulative Pay			
12000.00	7	0.00 12000.00		
TERMS Date Incurred	Da	ate Due Interest Rate Secured:		
M 10 M / D 21 D / Y 2015	M = M / D = D	0.00 % (apr) Yes X No		
List All Endorsers or Guarantors (if any) t	to Loan Source			
1. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:		
2. Full Name (Last, First, Middle Initial)	<u>'</u>	Name of Employer		
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:		
3. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:		
4. Full Name (Last, First, Middle Initial)	'	Name of Employer		
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:		
SUBTOTALS This Period This Page (optional)				
Carry outstanding balance only to LINE 3. Sci	hedule D. for this	line. If no Schedule D, carry forward to appropriate line of Summary.		

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 8 OF 21

		Detailed Sulfilliary Page FOR LINE 13 OF FORM 3X		
IAME OF COMMITTEE (In Full) COURAGEOUS CONSERVATIVE	S PAC	Transaction ID : SC/10.4281		
LOAN SOURCE Full Name (Last, First, Mi Ekstrom, Christopher, , ,	ddle Initial)	Memo Item Election: Primary General		
Mailing Address 25 Highland Park Village		Other (specify) ▼		
Suite 100				
City	State	ZIP Code		
Dallas	TX	75205		
Original Amount of Loan	Cumulative Pay	nent To Date Balance Outstanding at Close of This Period		
15000.00		0.00 15000.00		
TERMS Date Incurred	Di	te Due Interest Rate Secured:		
M 11 M / D 05 D / Y 2015	M M / D D	/		
List All Endorsers or Guarantors (if any) t	o Loan Source			
Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:		
2. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:		
3. Full Name (Last, First, Middle Initial)	·	Name of Employer		
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:		
4. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:		
SUBTOTALS This Period This Page (optional)				
		line. If no Schedule D, carry forward to appropriate line of Summary.		

Use separate schedule(s) for each category of the Detailed Summary Page

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FOR LINE 13 OF FORM 3X

		TOTALINE TO OT TOTALINE		
IAME OF COMMITTEE (IN FUII) COURAGEOUS CONSERVATI	VES PAC	Transaction ID : SC/10.4283		
LOAN SOURCE Full Name (Last, First Ekstrom, Christopher, , ,	, Middle Initial)	N ☐ Memo Item		
Mailing Address 25 Highland Park Village Suite 100		Other (specify) ▼		
City	State	ZIP Code		
Dallas	TX	75205		
Original Amount of Loan	Cumulative Pay	ment To Date Balance Outstanding at Close of This Period		
30000.00		0.00 30000.00		
Date Incurred M11 / D17 / Y 2015	D D D	ate Due Interest Rate Secured: / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
List All Endorsers or Guarantors (if an	ny) to Loan Source			
1. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City Stat	e ZIP Code	Amount Guaranteed Outstanding:		
2. Full Name (Last, First, Middle Initial)	,	Name of Employer		
Mailing Address		Occupation		
City Stat	e ZIP Code	Amount Guaranteed Outstanding:		
3. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City	e ZIP Code	Amount Guaranteed Outstanding:		
4. Full Name (Last, First, Middle Initial)	,	Name of Employer		
Mailing Address		Occupation		
City Stat	e ZIP Code	Amount Guaranteed Outstanding:		
SUBTOTALS This Period This Page (optional)				
TOTALS This Period (last page in this line only)				
Carry outstanding balance only to LINE 3. Schedule D. for this line. If no Schedule D. carry forward to appropriate line of Summary.				

Use separate schedule(s) for each category of the Detailed Summary Page

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		Detailed Sulfillary Page FOR LINE 13 OF FORM 3X		
IAME OF COMMITTEE (In Full) COURAGEOUS CONSERVATIVE	S PAC	Transaction ID : SC/10.4404		
LOAN SOURCE Full Name (Last, First, Mir Ekstrom, Christopher, , ,	N ☐ Memo Item			
Mailing Address 25 Highland Park Village		Other (specify) ▼		
Suite 100				
City	State	ZIP Code		
Dallas	TX	75205		
Original Amount of Loan	Cumulative Pay	ment To Date Balance Outstanding at Close of This Period		
6500.00	-	0.00 6500.00		
TERMS Date Incurred	D	ate Due Interest Rate Secured:		
M 01 M / D 05 D / Y 2016	M M / D D	/ 11/8/16 0.00 % (apr) Yes ✗ No		
List All Endorsers or Guarantors (if any) t	o Loan Source			
Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:		
2. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:		
3. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:		
4. Full Name (Last, First, Middle Initial)	·	Name of Employer		
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:		
SUBTOTALS This Period This Page (optional)				
		line. If no Schedule D, carry forward to appropriate line of Summary.		

Use separate schedule(s) for each category of the Detailed Summary Page

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FOR LINE 13 OF FORM 3X

		TOTALINE TO OT TOTALINE		
NAME OF COMMITTEE (In Full) COURAGEOUS CONSERVATIV	ES PAC	Transaction ID : SC/10.4405		
LOAN SOURCE Full Name (Last, First, Ekstrom, Christopher, , ,	Middle Initial)	N		
Mailing Address 25 Highland Park Village Suite 100		Other (specify) ▼		
City	State	ZIP Code		
Dallas	TX	75205		
Original Amount of Loan	Cumulative Pay	yment To Date Balance Outstanding at Close of This Period		
20000.00		0.00 20000.00		
TERMS Date Incurred	D	ate Due Interest Rate Secured:		
M 01 M / D 22 D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	M = M / D = D	/ 11/8/16 0.00 % (apr) Yes ✗ No		
List All Endorsers or Guarantors (if any) to Loan Source			
1. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:		
2. Full Name (Last, First, Middle Initial)	'	Name of Employer		
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:		
3. Full Name (Last, First, Middle Initial)	·	Name of Employer		
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:		
4. Full Name (Last, First, Middle Initial)	·	Name of Employer		
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:		
SUBTOTALS This Period This Page (optional)				
TOTALS This Period (last page in this line only)				
Carry outstanding balance only to LINE 3. Schedule D. for this line. If no Schedule D. carry forward to appropriate line of Summary				

Use separate schedule(s) for each category of the Detailed Summary Page

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		Detailed Sufficially Page FOR LINE 13 OF FORM 3X	
IAME OF COMMITTEE (IN FUII) COURAGEOUS CONSERVATIVE	ES PAC	Transaction ID: SC/10.4406	
LOAN SOURCE Full Name (Last, First, M Ekstrom, Christopher, , ,	liddle Initial)	N ☐ Memo Item	
Mailing Address 25 Highland Park Village		Other (specify) ▼	
Suite 100	Otata	7ID Oada	
City	State	ZIP Code	
Original Amount of Loan	Cumulative Pay		
8000.00	Cumulative Fay	0.00 Balance Odistanding at close of This Feriod	
TERMS	D	nto Duo Interest Data Conurado	
Date Incurred Mo1 / D25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	M = M / D = D	ate Due Interest Rate Secured: Y 1 1/8/16 0.00 % (apr) Yes X No	
List All Endorsers or Guarantors (if any)	to Loan Source		
Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	
4. Full Name (Last, First, Middle Initial)	·	Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	
SUBTOTALS This Period This Page (optional)			
		line. If no Schedule D, carry forward to appropriate line of Summary.	
Carry Outstanding Datable UNIV to LINE 3. 30	medule D. (Of this	inie, ii no ocheuule d. carry lorwaru to appropriate iine of oummary.	

Use separate schedule(s) for each category of the Detailed Summary Page

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			Detailed Summary Page FOR LINE 13 OF FORM 3X
AME OF COMMITTEE (In Full) Transaction ID : SC/10.4500			
COURAGEOUS CONS	ERVATIVE	S PAC	
LOAN SOURCE Full Name (Last, First, Middle Initial) N			
Ekstrom, Christopher, , ,			Primary
			General
Mailing Address 25 Highland	Park Village		U Other (specify) ▼
Suite 100			
City State ZIP Co			ZIP Code
Dallas	Dallas TX 75.		75205
Original Amount of Loan Cumulative Payment		Cumulative Page	yment To Date Balance Outstanding at Close of This Period
8500.00			0.00 8500.00
TERMS			Data Dua Gasuradi
Date Incurred	2016 Y	M M M / D D	Date Due Interest Rate Secured:
02 03	2016		0.00 % (apr) Yes x No
List All Endorsers or Guara	ntors (if anv)	to Loan Source	
Full Name (Last, First, Michael Last, First, First, Michael Last, First, F	, ,,		Name of Employer
	,		
Mailing Address			Occupation
City	State	ZIP Code	Amount
	Sidio	2 3000	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)			Name of Employer
Mailing Address			Occupation
	i		
City	State	ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)			Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount
			Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)			Name of Employer
Mailing Address			Occupation
iviaining Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional)			
TOTALS This Period (last page	in this line onl	y)	
Carry outstanding balance only	to LINE 3, Sc	hedule D, for this	s line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the Detailed Summary Page

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FOR LINE 13 OF FORM 3X

AME OF COMMITTEE (IN FU	•	S PAC	Transaction ID : SC/10.4505
LOAN SOURCE Full Name (Last, First, Middle Initial) Ekstrom, Christopher, , ,			N
Mailing Address 25 Highland Park Village Suite 100			General Other (specify) ▼
City		State	ZIP Code
Dallas	Dallas TX		75205
Original Amount of Loan Cumulative		Cumulative Pa	yment To Date Balance Outstanding at Close of This Period 0.00 30000.00
Date Incurre	2016 Y	M = M / D = I	Date Due Interest Rate Secured: 0.00 % (apr) Yes No
List All Endorsers or Guar 1. Full Name (Last, First, M	, ,,	to Loan Source	Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)			Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, M	fiddle Initial)	·	Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, M	fiddle Initial)		Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
COTALS This Period This			30000.00
	nly to LINE 3, Sc	hedule D, for th	s line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the Detailed Summary Page

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		Detailed Sulfillary Page FOR LINE 13 OF FORM 3X
IAME OF COMMITTEE (IN FUII) COURAGEOUS CONSERVATIVE	S PAC	Transaction ID : SC/10.4510
LOAN SOURCE Full Name (Last, First, M Ekstrom, Christopher, , ,	iddle Initial)	N
Mailing Address 25 Highland Park Village		Other (specify) ▼
Suite 100		
State ZIP Cod		ZIP Code
Dallas TX		75205
Original Amount of Loan Cumulative Payme		ment To Date Balance Outstanding at Close of This Period
17000.00		0.00 17000.00
TERMS Date Incurred	D	tte Due Interest Rate Secured:
M 02 M / D 22 D / Y 2016	M = M / D = D	0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any)	to Loan Source	
Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	'	Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional) TOTALS This Period (last page in this line on		7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
		line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the Detailed Summary Page

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FOR LINE 13 OF FORM 3X NAME OF COMMITTEE (In Full) Transaction ID: SC/10.4555 **COURAGEOUS CONSERVATIVES PAC** Election: **LOAN SOURCE** Full Name (Last, First, Middle Initial) Ekstrom, Christopher, , , Memo Item Primary General Mailing Address 25 Highland Park Village Other (specify) ▼ Suite 100 City State ZIP Code Dallas 75205 TX Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 10000.00 10000.00 0.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 18 03 2016 X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Occupation Mailing Address City State ZIP Code Amount Guaranteed Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation City State ZIP Code Amount Guaranteed Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation ZIP Code City State Amount Guaranteed Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation City ZIP Code State Amount Guaranteed Outstanding: SUBTOTALS This Period This Page (optional)..... 10000.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the Detailed Summary Page

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FOR LINE 13 OF FORM 3X

		TOTALINE TO TOTAL TO OF TOTAL ON	
NAME OF COMMITTEE (In Full) COURAGEOUS CONSERVATI	/ES PAC	Transaction ID : SC/10.4892	
LOAN SOURCE Full Name (Last, First, Ekstrom, Christopher, , ,	Middle Initial)	N	
Mailing Address 25 Highland Park Village Suite 100		Other (specify) ▼	
City	State	ZIP Code	
Dallas TX		75205	
Original Amount of Loan Cumulative Paymen		yment To Date Balance Outstanding at Close of This Period	
4567.89		0.00 4567.89	
TERMS Date Incurred	C	ate Due Interest Rate Secured:	
		0.00 % (apr) Yes X No	
List All Endorsers or Guarantors (if any	/) to Loan Source		
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Initial)	'	Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	
4. Full Name (Last, First, Middle Initial)	,	Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	
SUBTOTALS This Period This Page (option	al)	4567.89	
TOTALS This Period (last page in this line only)			
Carry outstanding balance only to LINE 3	Schedule D. for this	s line. If no Schedule D. carry forward to appropriate line of Summary	

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		Detailed Summary Page FOR LINE 13 OF FORM 3X	
AME OF COMMITTEE (In Full) Transaction ID : SC/10.4891			
COURAGEOUS CONSERVATI	VES PAC		
LOAN SOURCE Full Name (Last, First Ekstrom, Christopher, , ,	, Middle Initial)	N ☐ Memo Item Election:	
Ekstroni, Gilistopher, , ,		Primary General	
Mailing Address 25 Highland Park Village		Other (specify) ▼	
Suite 100			
City	State	ZIP Code	
Dallas	TX	75205	
Original Amount of Loan	Cumulative Pay	ment To Date Balance Outstanding at Close of This Period	
6000.00		0.00	
TERMS			
Date Incurred	Da	ate Due Interest Rate Secured:	
07 ^M / 11 D / 2016	0.00 % (apr) Yes X No		
List All Endorsers or Guarantors (if an	ny) to Loan Source		
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
3 11 11			
City	e ZIP Code	Amount Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Initial)	,	Name of Employer	
Mailing Address		Occupation	
City	e ZIP Code	Amount Guaranteed Outstanding:	
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City	e ZIP Code	Amount Guaranteed Outstanding:	
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City	e ZIP Code	Amount Guaranteed Outstanding:	
SUBTOTALS This Period This Page (optional)			
TOTALS This Period (last page in this line only)			
Carry outstanding balance only to LINE 3.	Schedule D. for this	line. If no Schedule D, carry forward to appropriate line of Summary.	
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		Detailed Suffillary Fage FOR LINE 13 OF FORM 3X
IAME OF COMMITTEE (IN Full) COURAGEOUS CONSERVATIV	ES PAC	Transaction ID : SC/10.4918
LOAN SOURCE Full Name (Last, First, MEkstrom, Christopher, , ,	Middle Initial)	N
Mailing Address 25 Highland Park Village		Other (specify) ▼
Suite 100		
City State ZIP (ZIP Code
Dallas TX		75205
Original Amount of Loan Cumulative P		ment To Date Balance Outstanding at Close of This Period
10013.46		0.00 10013.46
TERMS Date Incurred	D	ate Due Interest Rate Secured:
M 08 / 04 / 2016 M M M / D D / D D / D D / D D / D D / D D / D D / D D / D D / D D / D D / D D / D D / D D / D D D / D D D / D D D / D D D / D D D / D D D / D D D / D D D / D D D / D D D D / D		/ 12/31/2020 0.00 % (apr) Yes ✗ No
List All Endorsers or Guarantors (if any)	to Loan Source	
Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	•	Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed Outstanding:
SUBTOTALS This Period This Page (optiona		
TOTALS This Period (last page in this line or		line. If no Schedule D, carry forward to appropriate line of Summary.
Carry Outstanding Datable UNIV to LINE 3. 5	CHEQUIE D. TOT TAIS	mile, il no ochequie di carry forward to appropriate line of oummary.

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		Detailed Sulfillary Page FOR LINE 13 OF FORM 3X
IAME OF COMMITTEE (IN FUII) COURAGEOUS CONSERVATIVE	S PAC	Transaction ID : SC/10.4934
LOAN SOURCE Full Name (Last, First, M Ekstrom, Christopher, , ,	iddle Initial)	N ☐ Memo Item
Mailing Address 25 Highland Park Village		Other (specify) ▼
Suite 100		
City State ZIP C		ZIP Code
Dallas TX		75205
Original Amount of Loan Cumulative		ment To Date Balance Outstanding at Close of This Period
9500.00		0.00 9500.00
TERMS Date Incurred	D	ate Due Interest Rate Secured:
M 09 / 19 / Y 2016 Y	M M / D D	12/31/2020 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any)	to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional)		3300.00
Carry outstanding balance only to LINE 3. Sc		line. If no Schedule D, carry forward to appropriate line of Summary.

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FOR LINE 13 OF FORM 3X

		TOTALINE TO OT TOTALINE	
NAME OF COMMITTEE (In Full) COURAGEOUS CONSERVATI	/ES PAC	Transaction ID : SC/10.4948	
LOAN SOURCE Full Name (Last, First, Ekstrom, Christopher, , ,	Middle Initial)	N ☐ Memo Item	
Mailing Address 25 Highland Park Village Suite 100		Other (specify) ▼	
		ZIP Code	
Dallas TX		75205	
Original Amount of Loan Cumulative Paym		ment To Date Balance Outstanding at Close of This Period	
15420.00		0.00 15420.00	
TERMS Date Incurred	D	ate Due Interest Rate Secured:	
11 16 / Y 2016 M M M / D D /		/ 12/31/2020	
List All Endorsers or Guarantors (if any) to Loan Source		
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	
3. Full Name (Last, First, Middle Initial)	·	Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	
SUBTOTALS This Period This Page (option	al)	15420.00	
TOTALS This Period (last page in this line only)			
Carry outstanding balance only to LINE 3	Schedule D. for this	s line. If no Schedule D. carry forward to appropriate line of Summary	